

**STATE OF MICHIGAN**  
**DEPARTMENT OF INSURANCE AND FINANCIAL SERVICES**  
**Before the Director of the Department of Insurance and Financial Services**

**In the matter of:**

**Bailey Family Chiropractic  
Petitioner**

**v**

**File No. 21-1800**

**Auto Club Group Insurance Company  
Respondent**

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**Issued and entered  
this 7<sup>th</sup> day of February 2022  
by Sarah Wohlford  
Special Deputy Director**

**ORDER**

**I. PROCEDURAL BACKGROUND**

On December 2, 2021, Bailey Family Chiropractic (Petitioner) filed with the Department of Insurance and Financial Services (Department) a request for an appeal pursuant to Section 3157a of the Insurance Code of 1956 (Code), 1956 PA 218, MCL 500.3157a. The request for an appeal concerns the determination of Auto Club Group Insurance Company (Respondent) that the Petitioner overutilized or otherwise rendered or ordered inappropriate treatment, products, services, or accommodations under Chapter 31 of the Code, MCL 500.3101 to MCL 500.3179.

The Petitioner's appeal is based on the denial of chiropractic treatment bills pursuant to R 500.64(3), which allows a provider to appeal to the Department from the denial of a provider's bill. The Respondent issued a bill denial to the Petitioner on October 26, 2021. The Petitioner now seeks reimbursement in the full amount it billed for the dates of service at issue.

The Department accepted the request for an appeal on December 13, 2021. Pursuant to R 500.65, the Department notified the Respondent and the injured person of the Petitioner's request for an appeal on December 13, 2021, and provided the Respondent with a copy of the Petitioner's submitted documents. The Respondent filed a reply to the Petitioner's appeal on December 22, 2021.

The Department assigned an independent review organization (IRO) to analyze issues requiring medical knowledge or expertise relevant to this appeal. The IRO submitted its report and recommendation to the Department on January 12, 2022.

## **II. FACTUAL BACKGROUND**

This appeal concerns the denial of payment for ten sessions of chiropractic manipulation provided to an individual injured in an automobile accident in June 2006. The injured person began treatment with the Petitioner in September 2012 for neck and shoulder stiffness with associated headaches, upper back pain and stiffness, and bilateral hip pain. At issue in this appeal are treatment sessions provided on the following dates in 2021: June 11, 14, and 28; July 8, 22, and 30; August 11; September 9, 23; and October 7.

With its appeal request, the Petitioner submitted records from its initial examination of the injured person. In its appeal, the Petitioner stated that it is necessary for the injured person to receive “routine chiropractic spinal manipulation” so she can perform regular activities of daily living. The Petitioner stated that without those treatments the injured person would need to take prescription pain killers every day in order to be able to walk without pain.

In its reply, the Respondent stated that the submitted medical records do not support the Petitioner’s request. The Respondent stated that the chiropractic treatment quantity exceeds the American College of Occupational and Environmental Medicine (ACOEM) guidelines of 12 sessions over six to eight weeks. Further, ample opportunity was given to establish a self-directed conditioning and exercise program.

## **III. ANALYSIS**

### **Director’s Review**

Under MCL 500.3157a(5), a provider may appeal an insurer’s determination that the provider overutilized or otherwise rendered inappropriate treatment, products, services, or accommodations, or that the cost of the treatment, products, services, or accommodations was inappropriate under Chapter 31 of the Code. This appeal involves a dispute regarding overutilization.

The Director assigned an IRO to review the case file. The IRO reviewer is a chiropractor in active practice who has been board certified in chiropractic care since 2016. The IRO reviewer concluded, based on the submitted documentation, that the treatments provided to the injured person on the dates in question were overutilized in frequency and duration in accordance with medically accepted standards as defined by R 500.61(i). The IRO reviewer wrote:

The most appropriate practice guidelines for chiropractic treatments are from The North American Spine Society, Journal of Alternative Complimentary Medicine, and Journal of Manipulative and Physiological Therapeutics.

The North American Spine Society clinical guidelines state initial treatment should consist of 6-12 visits over a month to 6 weeks duration if considered acute or chronic, ending with an evaluation of effectiveness and a determination.

The best practices for chiropractic management of patients with chronic musculoskeletal pain as stated in The Journal of Alternative and Complementary

Medicine state the importance of the use of a validated Patient-Reported Outcome Measures to assess patient symptoms and characteristics, and to assess progress over time.

The Journal of Manipulative and Physiological Therapeutics best practice recommendations for chiropractic management of neck pain state the practitioner should evaluate the patient briefly during each encounter, pre- and post-treatment and conduct a more focused condition-specific evaluation after each benchmark in the treatment plan.

\* \* \*

The chiropractic treatments provided ... were overutilized in frequency and duration, as there is no documented justification based on a lack of progress or change in [the injured person's] clinical condition. Initial treatment should have consisted of 6-12 visits over a month to 6 weeks duration if considered acute or chronic, ending with an evaluation of effectiveness and a determination if further care was needed.

In reviewing the records provided, there is no documented re-examination or outcome measures for these visits, other than her initial visit approximately 9 years prior. Clinical practice guidelines suggest use of re-examination and outcome measures to assess progress or lack thereof within 6-12 weeks of initial or previous examination. In addition, outside of [the] letter for appeal, there is no proof of improvement per his records that would suggest [the injured person] was benefiting from care. While there is evidence to support spinal manipulation is beneficial for neck and back pain, the effectiveness of care in [this] clinical scenario is not present.

Also of note, there is evidence that supports the use of preventative/maintenance chiropractic care, however the evidence suggests that a patient receiving preventive care, should report good outcomes from treatment, which is not present in [Petitioner's] records. Despite there being benefit of chiropractic care for acute and chronic conditions and maintenance care, there still needs to be evidence of progress to determine if continuation of care is necessary. Therefore...the chiropractic treatments on 6/11/2021, 6/14/2021, 6/28/2021, 7/08/2021, 7/22/2021, 7/30/2021, 8/11/2021, 9/9/2021, 9/23/2021, and 10/7/2021 were overutilized in frequency and duration.

The IRO reviewer recommended that the Director uphold Respondent's October 26, 2021, determination.

#### **IV. ORDER**

The Director upholds the Respondent's October 26, 2021, determination.

This order applies only to the treatment and dates of service discussed herein and may not be relied upon by either party to determine the injured person's eligibility for future treatment or as a basis for action on other treatment or dates of service not addressed in this order.

This is a final decision of an administrative agency. A person aggrieved by this order may seek judicial review in a manner provided under Chapter 6 of the Administrative Procedures Act of 1969, 1969 PA 306, MCL 24.301 to 24.306. MCL 500.244(1); R 500.65(7). A copy of a petition for judicial review should be sent to the Department of Insurance and Financial Services, Office of Research, Rules, and Appeals, Post Office Box 30220, Lansing, MI 48909-7720.

Anita G. Fox  
Director  
For the Director:

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X *Sarah Wohlford*

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Sarah Wohlford  
Special Deputy Director  
Signed by: Sarah Wohlford